

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

JEB 2016, INC.

A. Full Name (Last, First, Middle Initial)

MR. RUSSELL SCHWEISS

Mailing Address 108 PINETA WAY

City

SAINT JOHNS

State

FL

Zip Code

32259-8219

FEC ID number of contributing
federal political committee.

C

Name of Employer

RAYONIER ADVANCED MATERIALS

Occupation

DIRECTOR OF CORP COMM & COMM RELA

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Transaction ID : SA17.109710

Date of Receipt

06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

MR. RUSSELL SCHWEISS

Mailing Address 108 PINETA WAY

City

SAINT JOHNS

State

FL

Zip Code

32259-8219

FEC ID number of contributing
federal political committee.

C

Name of Employer

RAYONIER ADVANCED MATERIALS

Occupation

DIRECTOR OF CORP COMM & COMM
RELATIONS

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Transaction ID : SA17.118751

Date of Receipt

06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

25.00

C. Full Name (Last, First, Middle Initial)

DR. SANDRA SCHWEMMER

Mailing Address 3577 NORTHWEST CLUBSIDE CIRCLE

City

BOCA RATON

State

FL

Zip Code

33496-4004

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCDPBC

Occupation

PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17.118188

Date of Receipt

06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

2700.00

Subtotal Of Receipts This Page (optional).....

2975.00

Total This Period (last page this line number only).....